BEST AVAILABLE COPY 09/758 957												
PATENT APPLICATION FEE DETERMINATION RECO							Application or Dockel Number					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL	ENTITY	<del>7/                                    </del>		R THAN	
TOTAL CLAIMS			5-	5-4			TYPE	FEE	OR T		ENTITY	İ
FOR			NUMBER	NUMBER FILED		NUMBER EXTRA		EE 355.00	7	BASIC FEE	FEE 710.00	
TOTAL CHARGEABLE CLAIMS			10 4minus 20=		· X4		X\$ 9=	-	7	¥242	1	
INDEPENDENT CLAIMS			7 minus 3 =		• 4		-		OR	<del></del>	1582	ŀ
MULTIPLE DEPENDENT CLAIM P					P		X40=	-	OR		320	İ
•1	f the difference	e in column 1 is	less than z	ero, enter	*0* in column 2		+135=	4	OR	+270=	270	[
* If the difference in column 1 is less than zero, enter *0* in column 2  CLAIMS AS AMENDED - PART II							TOTAL	· L	OR	TOTAL	28 \$ 2	ı
	(Column 1) (Column 2) (Column 3)							ENTITY	OR	OTHER SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 21	Minus	. 9	じ	=	X\$ 9=		OR	X\$18=		
AME	Independent	· U	Minus			. /	X40=			X80=	7	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							405		OR			
							+135= TOTAL		OR	+270=		
3-7-05 (Calumn 1) (Column 2) (Column 3)							ADDIT. FEE		OR	ADDIT. FEE		
<b>5</b> l		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.12	Minus	. / (	24	=	X\$ 9=		OR	X\$18=	1	
	Independent	. 2	Minus	•••	2	=/	X40=			X80=	<del>-/-</del> -	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .									OR OR	+270=	<del>/  </del>	
	11/2/	2					TOTAL ADDIT FEE		L	TOTAL DDIT. FEE		
		(Column 1)	ENVIOLENCE STATE OF THE PERSON	(Colum		(Column 3)						
Z	Mark.	REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	EA JSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 8	Minus '	1/29	1	=	X\$ 9=		OR	XS18=		
N N	Independent	NTATION OF A	Minus	··· 4		<i>y</i>	X40=	<del>-</del>	OR	X80=	-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							+135=		OR L	+270= TOTAL		
	i ine Highest Nur	nber Previously Pa nber Previously Pak ber Previously Pak	id For IN THIS	S SPACE is I	ace than	3 antar 7	ADDIT. FEE		OR AI	DOIT, FEE L		

FORM PTO-875

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